CLAIMS ONLY

SERIAL NO. /0/3899 FILING DATE

APPLICANT(S)

CLAIMS

T	ASF	ILED		TER	AF	TER	Ī
	IND.	DEP.	IND.	DEP.	IND.	DEP.	\forall
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31	1	 	† 	+	1	+	_
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33		+ 7	 			+	_
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35		1	+	+	1	1	-
36		1	1	1	1	1	-
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39		+ 7	+	+	+	+	_
40	 -	1 7	 	1	1	+	_
41		+ '/	1	1	+	+	_
42	 	1 /	 				_
43	<u> </u>	1	1	+	1	<u> </u>	_
44		+ ;	+	+	+	1	-
45		1	+	1	+	1	-
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100						1		
TOTAL IND.	9							
TOTAL IND. TOTAL DEP. TOTAL CLAIMS	9 56 65			_1		_1		

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS